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PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

Application or Docket Number

10/646218

CLAIMS AS FILED - PART I

(Column 1)		(Column 2)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.10(a))				\$ _____	OR		\$ _____
TOTAL CLAIMS (37 CFR 1.10(c))	minus 20 *	*	X \$ _____ *		OR	X \$ _____ *	
INDEPENDENT CLAIMS (37 CFR 1.10(b))	minus 3 *	*	X \$ _____ *		OR	X \$ _____ *	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))			+ \$ _____ *		OR	+ \$ _____ *	
TOTAL					OR	TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

AMENDMENT A	(Column 1)		(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))	6	Minus	20	*	X \$ 25 *		OR	X \$ 50 *	
Independent (37 CFR 1.16(b))	2	Minus	3	*	X \$ 100 *		OR	X \$ 200 *	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$ _____ *		OR	+ \$ _____ *	
TOTAL ADDL FEE							OR	TOTAL ADDL FEE	

AMENDMENT B	(Column 1)		(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))		Minus		*	X \$ _____ *		OR	X \$ _____ *	
Independent (37 CFR 1.16(b))		Minus		*	X \$ _____ *		OR	X \$ _____ *	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$ _____ *		OR	+ \$ _____ *	
TOTAL ADDL FEE							OR	TOTAL ADDL FEE	

AMENDMENT C	(Column 1)		(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))		Minus		*	X \$ _____ *		OR	X \$ _____ *	
Independent (37 CFR 1.16(b))		Minus		*	X \$ _____ *		OR	X \$ _____ *	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$ _____ *		OR	+ \$ _____ *	
TOTAL ADDL FEE							OR	TOTAL ADDL FEE	

* If the entry in column 1 is less than the entry in column 2, enter "0" in column 3.
* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This document is a Patent Application Form and is not to be used by 37 CFR 1.16. The information is required to obtain or retain a benefit by the patent which is to be filed (and by the PTO) by the applicant. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 17 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FILES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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